S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 73 / 73
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) 17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam			
\rangle	NAME OF COMMITTEE (In Full) FRIENDS OF JOHN PETERSON			
۹.	Full Name (Last, First, Middle Initial) Crawford County Republican Committee			Transaction ID: 0020338 Date of Disbursement 05
	Mailing Address 25489 Rynd Dr			05 02 2007
	City Cochranton	State Zip Code PA 16314		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation Candidate Name		012 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		ement For: 2008 Primary General Other (specify)	Туре	
3.	Full Name (Last, First, Middle Initial) Pennsyvania Federation of Republican Wom			Transaction ID: 0020344 Date of Disbursement
	Mailing Address 806 North Second St			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
	City Harrisburg	State Zip Code PA 17102		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation Candidate Name		012 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	- H	ement For: 2008 (Primary General Other (specify)		
Э.	Full Name (Last, First, Middle Initial) Ryun for Congress			Transaction ID: 0020368 Date of Disbursement
	Mailing Address PO BOX 826			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & T \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{smallmatrix} \end{bmatrix} $
	City Topeka	State Zip Code KS 66601		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Other Candidates 011			1000.00 Refund or Disposal of Excess
			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
		ement For: 2008 (Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)				